AUG 1 7 2005

PTO/SB/22 (12-04)
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	XTENSION OF TIME UNDER 37	Docket Number (Optional)								
(Fees pursuant to t	FY 2005 he Consolidated Appropriations Act, 20	377882001420								
Application Number		Filed August 10, 2001								
For BIODEGRADABLE IMMUNOMODULATORY FORMULATIONS AND METHODS FORUSE THEREOF										
Art Unit 1645			Examiner	N. Minnifield						
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.										
The requested exte	ension and fee are as follows (check	time period desi	red and enter the appr	opriate fee below):						
		<u>Fee</u>	Small Entity Fee							
One m	onth (37 CFR 1.17(a)(1))	\$120	\$60	<u>\$</u>						
Two m	onths (37 CFR 1.17(a)(2))	\$450	\$225	_\$						
X Three	months (37 CFR 1.17(a)(3))	\$1020	\$510	\$ 510.00						
Four m	nonths (37 CFR 1.17(a)(4))	\$1590	\$795	\$						
Five months (37 CFR 1.17(a)(5)) \$2160			\$1080	\$						
X Applicant claims small entity status. See 37 CFR 1.27. 08/22/2005 CNGUYEN2 00000068 031952 09927422										
A check in the	he amount of the fee is enclosed.	01 FC:2	2253 510.00 DA	a						
Payment by credit card. Form PTO-2038 is attached.										
The Director has already been authorized to charge fees in this application to a Deposit Account.										
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 03-1952 Have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.										
I am the	applicant/inventor.									
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).										
x	attorney or agent of record. Re	gistration Number	т33,888							
	attorney or agent under 37 CFR									
	Registration number if acting und	ler 37 CFR 1.34		·						
	luf J. (year	August 17, 2005								
	/Signature'	Da	ate							
	Debra J. Glaister Typed or printed name	(650) 813-5725 Telephone Number								
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more										
than one signature is		, and and section representations	ooomaniio(o) ale lequileu. Out	ons maniple forms it more						
X Total of	1 forms are submitte	d.								

PTO/SB/17 (12-04v2)
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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			. 4818).	Application Number		09/927,422					
FEE TRANSMITTAL				Filing Date		August 10, 2001					
						Gary VAN NEST					
For FY 2005				Examiner Name		N. Minnifield					
X Applicant claims small entity status. See 37 CFR 1.27				Art Unit	16	1645					
TOTAL AMOUNT OF PAYMENT (\$) 510.00				Attorney Docket No. 3778820014			.0				
METHOD OF PAYMENT (check all that apply)											
Check Credit Card Money Order None Other (please identify):											
X Deposit Ac	count Deposit Account	Number: 03-1952 D	eposit Accou	int Name:	Morri	son & Foerst	er LLP				
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)											
X CI	harge fee(s) indicated	d below		Charge	e fee(s) indic	ated below, ex	cept for t	he filing fee			
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17											
FEE CALCUI	LATION										
1. BASIC FILIN	G, SEARCH, AND E	XAMINATION FEE	S								
ļ.	FI	LING FEES	SEAF	RCH FEES	EXAMINA	TION FEES					
Application Ty	vpe Fee (\$	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees F	Paid (\$)			
Utility	300	150	500	250	200	100	-				
Design	200	100	100	50	130	65					
Plant	200	100	300	150	160	80					
Reissue	300	150	500	250	600	300					
Provisional	200	100	0	0	0	0					
2. EXCESS CL	AIM FEES						-	Small Entity			
Fee Description Each claim over 20 (including Reissues)								<u>Fee (\$)</u> 25			
Each independent claim over 3 (including Reissues)							50 200	100			
	Multiple dependent claims							180			
1				36 Paid (\$) <u>Multiple Dependent Cl</u>							
			.00 Fee (\$)			Fee Paid (\$)					
					18		0.00	-			
Indep. Claims	Extra Claims	Fee (\$)	Fee Pa	id (\$)							
4	-4= 0	× <u>100</u> = _	0.0	00							
3. APPLICATIO											
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer											
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).											
Total Sheet				ditional 50 or frac	tion thereof	Fee (\$)	Fee	Paid (\$)			
1044.01199.	- 100 =	/50		round up to a who		-					
4. OTHER FEE(S) Fees Paid (\$)											
Non-English Specification, \$130 fee (no small entity discount)											
Other (e.g., late filing surcharge): 2253 Extension for response within third month 510.00											
SUBMITTED BY											
Signature	LM(1-	Muist		Registration No. Attorney/Agent)	33,888	Telephone	(650) 81	3-5725			
Name (Print/Type)	Debra J. Glajster					Date	August 1	1 , 2005			